

Provider Education on Medicaid National Corrective Coding Initiative Edits for Immunization Administration and Preventive Medicine Services

February 7, 2013

On January 1, 2013, new Procedure-to-Procedure (PTP) edits were implemented in the Medicaid National Correct Coding Initiative (NCCI) that pair the immunization administration codes (CPT codes 90460 – 90474) as column one codes with the preventive medicine evaluation and management (E&M) service codes (CPT codes 99381 – 99397) as column two codes. All of the edits have a Correct Coding Modifier Indicator (CCMI) of “1”, which will result in the edit being bypassed, if a PTP-associated modifier, such as modifier 25, is correctly appended to the preventive medicine code. If a PTP-associated modifier, such as modifier 25, is not appended to preventive medicine code and, if both codes are reported on the same date of service, the column two code (i.e., the preventive medicine service) will be denied.

The edits are based on the instruction in the section on “Immunization Administration for Vaccines/Toxoids” in the *2013 CPT Manual*, which states:

If a significant separately identifiable Evaluation and Management service (e.g., new or established patient office or other outpatient services [99201 – 99215], office or other outpatient consultations [99241 – 99245], emergency department services [99281 – 99285], preventive medicine services [99381 – 99429]) is performed, the appropriate E/M service code should be reported in addition to the vaccine and toxoid administration codes.

A provider indicates on a claim that an E&M service is significant and separately identifiable from other services performed by appending modifier 25 (“Significant, Separately Identifiable Evaluation and Management Service by the Same Physician . . .”) to the E&M service code. It is understood that immunizations are commonly administered in conjunction with a comprehensive preventive medicine evaluation and that, when this occurs, both services are payable. If a provider administers immunization(s) and performs a significant, separately identifiable preventive medicine E&M service on the same date of service, reporting the E&M service with modifier 25 will bypass the NCCI PTP edit.

The edit prevents inappropriate payment of a preventive medicine E&M service, if the beneficiary just comes to the physician’s office for an immunization on a day other than the day of a comprehensive preventive medicine E&M service.

If a claim for a preventive medicine E&M service is denied because a provider did not append modifier 25 to that code, when it would have been appropriate to do so, the claim may be resubmitted with modifier 25 appended to the preventive medicine code if it is submitted within the timely filing requirements of a denied claim. The timely filing requirements require that a claim must be received within three months of a previously denied claim.

Please refer to the Medicaid NCCI webpage on the Medicaid.gov website (<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Data-and-Systems/National-Correct-Coding-Initiative.html>) and <http://dss.sd.gov/sdmedx/includes/portal/NCCI/index.aspx> to obtain additional information about the Medicaid National Correct Coding Initiative.